Change of Information Form

Change of home address:	Change of work address:	Change of name:
_	_	
Change of name due to o		rriage: Send COPY of Marriage Certificate of first page of court document indicating Civil Action Number ND ENTIRE DOCUMENT)
Change of Firm Address:	(complete Section 2)	
Change of A.C. Address or sh	areholder information	_ Complete Section 4 below, sign & date)
Change of P.L.L.C. Address or	r member information	_ Complete Section 3 below, sign and date)
SECTION 2: FIRM OR IND	IVIDUAL NAME OR ADDRE	SS CHANGE (if AC or PLLC see below)
Name:		_ Name changed to:
Business Name:		
Business Address:		
Home Address:		
SECTION 3: CHANGE OF I	PROFESSIONAL LIMITED L	IABILITY COMPANY INFORMATION
P.L.L.C. Name:		
Phone:		
Addition/Deletion of members	s/managers:	
(Include name, address,		
BOA Certificate/Registration N	Number	
	of this company, I affirm that I	have read, understand, and subscribe to Board Rules and Regulations ogether with the changes indicated above, is true to the best of my
Signature		Date
	ACCOUNTING CORPORATION	
Affirmation of new Sharehold		
As a new shareholder of this	s corporation, I affirm that I h	ave read, understand, and subscribe to Board Rules and Regulations information, together with the changes indicated above, is true to the
Signature		 Date